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CONFIRMATION NO. 4322

SERIAL NUMBER 09/522,608	FILING DATE 03/10/2000 RULE	CLASS 370	GROUP ART UNIT 2697	ATTORNEY DOCKET NO. WN-2155
APPLICANTS Yoshiaki Nozawa, Tokyo, JAPAN; ** CONTINUING DATA ***** <i>TBD</i> <i>NONE</i> ** FOREIGN APPLICATIONS ***** JAPAN 63914/1999 10/03/1999 <i>3/10/1999</i> ← needs to be corrected <i>TBD</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/11/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 4	TOTAL CLAIMS 6
INDEPENDENT CLAIMS 1				
ADDRESS 21254				
TITLE Statistic multiplex transmission system				
FILING FEE RECEIVED 762	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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 Washington, D.C. 20231

SERIAL NUMBER 09/522,608	FILING DATE 03/10/2000 RULE -	CLASS 370	GROUP ART UNIT 2739	ATTORNEY DOCKET NO. WN-2155	
APPLICANTS Yoshiaki Nozawa, Tokyo, JAPAN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 63914/1999 10/03/1999 3/10/1999 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/11/2000 -					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>3/12/03</i> Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 4	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
ADDRESS McGinn & Gibb P C 1701 Clarendon Boulevard Suite 100 Arlington ,VA 22209					
TITLE Statistic multiplex transmission system					
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		